F-094

Moser
Patterson &
Sheridan, LLP

RECEIVED
CENTRAL FAX CENTER
NOV 0 5 2004

3040 Post Oak Blvd, Suite 1500 Houston, TX 77056-6582 TEL 713.623.4844 FAX 713.623.4846

WWW.HIPSLLP.COM

FACSIMILE COVER SHEET

DATE:

November 5, 2004

TO:

Commissioner for Patents

FAX NO:

703-872-9306

COMPANY:

USPTO

FROM:

John C. Carey

PAGE(S) with cover:

8

ORIGINAL TO

FOLLOW?

☐ YES 🖾 NO

REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS AND STATEMENT UNDER 37 CFR 3.73(b)

U.S. SERIAL NO .:

10/012,207

FILING DATE:

11/05/2001

ATTORNEY DOCKET NO .: AVAN/00 \ OOL

CONFIDENTIALITY NOTE

The document accompanying this facsimile transmission contains information from the law firm of Moser, Patterson & Sheridan, L.L.P. which is confidential or privileged. The information is intended to be for the use of the individual or entity named on this transmission sheet. If you are not the intended recipient, be aware that any disclosure, copying, distribution or use of the contents of this faxed information is prohibited. If you have received this facsimile in error, please notify us by telephone immediately so that we can arrange for the retrieval of the original documents at no cost to you.

312882_1.DOC

PTO/SB/82 (U9-U3)

Approved for use through 11/30/2005. OMB 0651-0035
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

ormation unless it displays a valid OMB control number. Under the Paperwork Reduction Act of 1995, no persons are required to r

REVOCATION OF POWER OF
ATTORNEY WITH
NEW POWER OF ATTORNEY
AND
HANGE OF CORRESPONDENCE
ADDRESS

Capona m a consecut to manage			
Application Number	10/012,207		١
Filing Date	11/05/2001	REC	EIVED
First Named Inventor	GOEL	CENTRAL	FAX CENTER
Art Unit	2661	NOV	0 5 2004
Examiner Name	UNKNOWN] 3 2001
Attorney Docket Number	AVAN/001004		,

I hereby revoke	I hereby revoke all previous powers of attorney or authorizations of agent given in the above-identified application:						
☐ A Power of	of Attorney i	s submitted herewith.					
OR	•						
☑ Please change the correspondence address for the above-identified application to:							
⊠ The a	☑ The address associated with						
Custo	omer Numb	nber: 47389					
OR						_	
∏ Firm <i>or</i> Individua	l Name						
Address							
Address	 -						
City	·					·	
Country	•		State		ZIP		
Telephone			Fax				
l am the:							
	icant/Invento	Dr.					
☐ Applicant/Inventor. ☐ Assignée of record of the entire interest. See 37 CFR 3.71.							
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)							
SIGNATURE of Applicant or Assignee of Record							
Name ⁻	Brian Kinard, General Counsel & Vice President, Legal Affairs						
Signature	Signature J. D.						
Date	1/2/04		Telephone		(510) 897-4188		
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.							
Submit matapit		n submitted					

This collection of information is required by 37 CFR 1.38. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time estimated to take 3 minutes to complete, including gathering, preparing, and submitting the complete this form end/or suggestions for will vary depending upon the individual case. Any comments on the amount of time you require to complete this form end/or suggestions for reducing this burden, should be sent to the Chief Information Officor, U.S. Patent and Tredemark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistence in comploting the form, call 1-800-PTO-9199 and select option 2.

PTO/SB/98 (06-04)
Approved for use through 07/31/2006. OMB 0631-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of Information unless it displays a valid OMB control number.

STATEMENT UNDER					
Applicant/Patent Owner: VIBHA GOEL Atto	mey Docket No.:_AVAN/001004				
	d/issue Date:11/05/2001				
Entitled: OPTICAL ROUTERS AND REDUNDANCY					
Annex Composition . a Delawate Cor	poration				
(Name of Assignee) (Type of Assignee, e.g., corporation, partnership, university, government agoncy, etc.)					
states that it is:					
1. X the assignee of the entire right, title, and interest; or					
2. an assignee of less than the entire right, title, and it	nterest				
The extent (by percentage) of its ownership inter	rest is %				
in the patent application/patent identified above by virtue of either A. An assignment from the inventor(s) of the patent application recorded in the United States Patent and Trademark Office thereof is attached.	salsatant idenimen annya. The assicilities it vies				
 OR B. \(\sum \) A chain of title from the inventor(s), of the patent applications shown below: 	on/patent identified above, to the current assignee as				
1. From: Vibha Goel To	Vitesse Semiconductor Corporation				
The document was recorded in the United States Pa	tent and Trademark Office at				
Reel <u>012720</u> , Frame <u>0816</u> , or for which a copy there	of is attached.				
2. From: Vitesse Semiconductor Corporation To	Avanex Corporation				
The document was recorded in the United States Pa	tent and Trademark Office at				
Reel, Frame, or for which a	copy thereon is attached.				
3. From:					
The document was recorded in the United States Pa	Itent and Trademark Office at				
Reel, Frame, or for which a copy thereof is attached.					
Additional documents in the chain of title are listed or	on a supplemental sheet.				
Copies of assignments or other documents in the chain of title are attached. [NOTE: A separate copy (i.e., a true copy of the original document(s)) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08]					
The undersigned (whose title is supplied below) is authorized to	11/2/07				
Signature	/ / Date				
Brian Kinard	(510) 897-4188				
Printed or Typed Name	Telephane Number				
General Counsel &					
Vice President, Legal Affairs					
Title					

This collection of information is required by 37 CFR 3.73(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Conflictntiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the included asset any comments on the emount of time you require to complete this form and/or suggestions for reducing this burdon, should be sent to include asset. Any comments on the emount of time you require to complete this form and/or suggestions for reducing this burdon, should be sent to include asset. Any comments on the emount of time you require to complete this form and/or suggestions for reducing this burdon, should be sent to include asset. Any comments on the emount of time you require to complete this form and/or suggestions for reducing this burdon, should be sent to include a set of the complete the following this burdon, should be sent to include a set of the complete the following this burdon, should be sent to include a set of the complete the following this burdon, should be sent to include a set of the complete the following this burdon, should be sent to the Chief information of the complete this formation. Set of the complete this formation of the complete the comp

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.